

EMPLOYEE PERFORMANCE APPRAISAL  
**SELF ASSESSMENT**

**My major accomplishments this year were:**

**I would like to have been more successful in the following areas:**

**Identified below are resources/support needed and areas of training and development that would be beneficial for my work:**

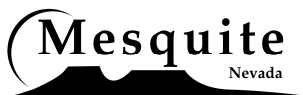
	<b>Helpful</b>	<b>Essential</b>
<input type="checkbox"/> Safety instruction in _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Computer skills in _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Specialist skills in _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Technical skills in _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Customer Service _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Resources/Support _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

**My goals and objectives for the next 12 months are:**

Employee Name (*Print*): \_\_\_\_\_ Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Dept: \_\_\_\_\_

**Attach to Performance Appraisal**



Due Date of Appraisal: \_\_\_\_\_

## EMPLOYEE PERFORMANCE APPRAISAL

Employee Name \_\_\_\_\_ Department: \_\_\_\_\_

Position/Job Title: \_\_\_\_\_ Division: \_\_\_\_\_

Appraisal Period Covered From \_\_\_\_\_ through \_\_\_\_\_

Type of Review: ☒ Annual ☐ End of Probation ☐ Interim/Special ☐ Other

### City of Mesquite Service Standards EVALUATION

**Directions:** Circle the performance rating that best reflects the employee's status.

**Quality Service and Customer Satisfaction:** Demonstrates a degree of excellence in the performance of one's duties, keeps commitments, and meets or exceeds the service expectations of both external and internal customers.

- Below Expectations:** Does not show pride in work or fails to give assignment the best of ability. Plans work ineffectively. Finished work product sometimes has mistakes. Does not always follow through with service commitments. Occasionally shows indifference towards customers.
- Meets Expectations:** Provides service that meets expectations for excellence. Completes work in the most effective, efficient way possible, using resources wisely. Finished work product does not contain mistakes. Supports co-workers. Sensitive to concerns and needs of supervisor, co-workers, customers, and others, and focuses on their needs. Measures results.
- Exceeds Expectations:** Consistently completes work without mistakes. Consistently works to improve quality of services, procedures and processes. Readily informs all those affected of any inconvenience, length of time needed for completion of a task, and asks if there are any other problems. Helps prevent recurrence of a problem. Finds good things to say about job, the City, and customers. Does what is asked plus extra. Looks for ways to do a better job.

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Teamwork and Attitude:** Demonstrates the ability to work together toward completion of a common goal and achieving it in the highest standard without personal prominence or recognition and demonstrates one's opinion, mood, or mental state about their job.

- Below Expectations:** Seldom shares information. Seldom listens and shares ideas. Schedules work with others randomly. Rarely supports ideas of others. Lacks initiative to help co-workers make the overall process better. Sometimes displays a negative attitude. Treats others in an inconsistent manner.
- Meets Expectations:** Performs tasks in a positive, proactive manner. Is friendly, helpful and courteous to all. Shares Knowledge and ideas with co-workers. Draws out and supports ideas of others. Makes a conscious effort to organize and encourage the team to reach common goals. Is willing to confront team problems and give constructive feedback on each task and process. Solves problems rather than complaining or blaming. Praises and values the work of others. Builds "trusting" relationships.
- Exceeds Expectations:** Consistently shares experience and knowledge with team members. Accepts and gives suggestions for constant improvement of the overall process. Actively seeks solutions to problems that will benefit co-workers and enhance team cooperation.

Comments: \_\_\_\_\_  
\_\_\_\_\_

## Recreation & Parks Department

### Employee Interdepartmental Developmental Review Standards

#### Employee Information

Name: \_\_\_\_\_

Supervisor  
(Optional): \_\_\_\_\_

Date: \_\_\_\_\_

Review  
Period: \_\_\_\_\_

-to- \_\_\_\_\_

#### Review Guidelines

**Complete this peer review, using the following City of Mesquite Service Standards:**

= Exceeds Expectations

= Meets Expectations

= Below Expectations

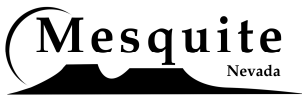
**NA** = Not Applicable

#### Job Performance Review

	Exceeds Expectations	Meets Expectations	Below Expectations	Not Applicable	Comments
Demonstrates Required Job Skills And Knowledge:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Has The Ability To Learn And Use New Skills:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Uses Resources Available In An Effective Manner:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Responds Effectively To Assigned Responsibilities:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Meets Attendance Requirements:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Listens Openly to Direction From Supervisor:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Takes Responsibility For Actions:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Honors Job Commitments:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates Problem Solving Skills:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Offers Constructive Suggestions For Improvement:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Generates Creative Ideas and Solutions:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates City Safety Requirements & Standards:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Meets Challenges Head On:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Interacts Effectively with Patrons/Community:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Interacts Effectively with Youth Participants:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## Employee Interdepartmental Developmental Review Standards

	Exceeds Expectations	Meets Expectations	Below Expectations	Not Applicable	Comments
<b>Interacts effectively with Co-Workers:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Demonstrates Innovative Thinking on the Job:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Demonstrates Organizational Skills on the Job:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Takes Responsibility for Equipment &amp; Care of Equipment:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Responds Quickly and Well to Problems:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Manages Time Effectively &amp; Efficiently:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Prioritizes Tasks Well:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Sets Aside Personal Biases and Wants:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Works Smarter, Not Harder:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Contributes to Good Dept. Moral:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Demonstrates Good Teamwork:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Works Well With Other Depts.:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



Due Date of Appraisal: \_\_\_\_\_

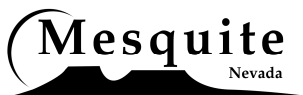
## **EMPLOYEE PERFORMANCE APPRAISAL GOALS AND OBJECTIVES**

\_\_\_\_\_ Employee successfully completed the goals and objectives that were set at the beginning of the performance period and were within the employee's control.

\_\_\_\_\_ Employee did not successfully complete the goals and objectives that were set at the beginning of the performance period and were within the employee's control.

### **GOALS FOR COMING PERFORMANCE CYCLE:**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



### **CERTIFICATION OF RATER:**

This appraisal represents my best judgment regarding the performance, service value and capability of this employee. It is based on personal observation and knowledge of his/her work.

Name *(Please Print)*: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

### **DEPARTMENT DIRECTOR:**

I have reviewed this appraisal and endorse the rating.

Name *(Please Print)*: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Director's Comments** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### **CERTIFICATION OF EMPLOYEE:**

I have reviewed this appraisal report and it has been explained to me. I understand that my signature does not necessarily mean that I am in agreement with the appraisal rating.

Name *(Please Print)*: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Employee Comments** (Optional)

*If necessary, additional comments made by the employee may be attached.*

Date received by Personnel Department: